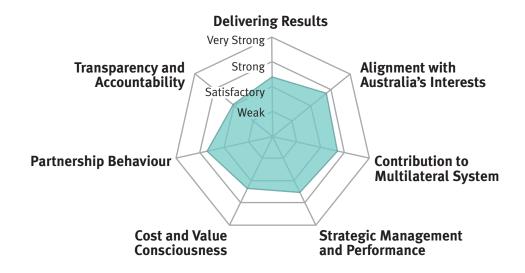




Australian Multilateral Assessment March 2012

# Joint United Nations Programme on HIV/AIDS (UNAIDS)

#### **OVERVIEW OF ORGANISATION RATINGS**



#### **ORGANISATION OVERVIEW**

Established in 1996 in response to a 1994 Economic and Social Council (ECOSOC) resolution, UNAIDS is the successor to the World Health Organization's Global Programme on AIDS. UNAIDS draws on the experience and strengths of its co-sponsors (10 UN system organisations) in providing assistance to build country and community capacity, and mobilising political and social support to prevent and respond to the threat of HIV.

Australia engages with the UNAIDS Programme Coordinating Board as a member of a constituency with Canada, Greece, New Zealand and Turkey. The Australia—UNAIDS Partnership Framework (2009–12) focuses on the Asia-Pacific region. Under the framework Australia will provide \$25.5 million over three years. Funding to UNAIDS through the Australian aid program in 2010–11 totalled \$10.7 million, including \$8.5 million of voluntary core contributions and \$2.2 million of non-core contributions.

#### **RESULTS AND RELEVANCE**

### 1. Delivering results on poverty and sustainable development in line with mandate

**SATISFACTORY** 

UNAIDS reports clearly on the outputs of its work. In 2010, for example, it supported the development of epidemiological estimates in 151 countries and supported 41 countries to develop national strategic plans or operational plans. However, understandably given its mandate, UNAIDS has struggled to measure and report on the development impact of its work.

In June 2011, UNAIDS approved its Unified Budget, Results and Accountability Framework 2012–15 (UBRAF). This framework strengthens links between investments by co-sponsors and progress against UNAIDS' strategic goals and paves the way for better reporting on impact, although it includes a large number of indicators which could create difficulties in implementation. It is too early to determine the framework's effectiveness.

The UBRAF places greater emphasis on better targeting support to countries with the highest disease burden, with a focus on the 'high impact' priority countries, which are mostly in Africa but include six countries in Asia.

### a) Demonstrates development or humanitarian results consistent with mandate

**SATISFACTORY** 

UNAIDS demonstrates some clear outputs, but it experiences challenges in reporting the development impacts of its work. This is understandable given its coordination mandate.

The second independent evaluation concluded that UNAIDS has been successful in achieving political and social mobilisation. In 2010, it supported the development of epidemiological estimates in 151 countries, and supported 41 countries to develop national strategic or operational plans.

Its coordination efforts appear to have some demonstrable effects. During the Global Fund's Round 10, countries which received UNAIDS support enjoyed a success rate of 69 per cent, compared to the overall proposal success rate of 41 per cent.

### b) Plays critical role in improving aid effectiveness through results monitoring

**SATISFACTORY** 

UNAIDS has traditionally had only limited policies and processes to monitor results. In June 2011, UNAIDS approved the UBRAF. This framework strengthens links between investments by co-sponsors and progress against UNAIDS' strategic goals, and paves the way for better reporting on impact at country-level. Despite some positive signs, it remains too early to adequately assess the impact of this new framework.

### c) Where relevant, targets the poorest people and in areas where progress against the MDGs is lagging

**STRONG** 

UNAIDS focuses on areas where progress against the MDGs is lagging, and in particular, populations at higher risk within these countries.

The UBRAF focuses on high impact priority countries, which includes 17 high disease burden countries, 10 concentrated epidemics or countries of compelling geopolitical relevance, and the 'BRICS' (Brazil, Russia, India, China, South Africa) countries . Within these countries, UNAIDS places particular emphasis on key populations at higher risk most likely to require assistance such as sex workers and people who inject drugs, for example.

### 2. Alignment with Australia's aid priorities and national interests

**STRONG** 

UNAIDS contributes to the Australian aid program's strategic goal of saving lives. It is well aligned with the Australian Government's HIV strategy *Intensifying the response: Halting the spread of HIV* in terms of prioritising HIV prevention, focusing on key populations and inclusive country-led responses. UNAIDS work also supports Australia's broader interests in the health-related Millennium Development Goals and human rights.

UNAIDS' geographic focus is not well aligned with Australia's strategic focus on the Asia-Pacific region. Although UNAIDS has a presence in 15 Asia-Pacific countries, only six of UNAIDS' high impact priority countries are in the region: Burma, Cambodia, China, India, Indonesia, and Thailand. Australia's extra-budgetary funding to the regional support team for Asia and the Pacific in part addresses this issue.

UNAIDS is strong in mainstreaming gender and human rights into its work is advocating for enabling social and legal environments. This is supported by its action plan for gender equality, which has improved gender disaggregated reporting and increased the involvement of women in national planning. However, the proportion of UNAID's budget allocated to gender-specific activities remains low.

UNAIDS does not have specific policies to working in fragile states but its focus on the high impact priority countries means it operates in a range of fragile-state environments.

### a) Allocates resources and delivers results in support of, and responsive to, Australia's development objectives

**STRONG** 

UNAIDS' policies and programs are consistent with Australia's priority of improving health and economic development. Although countries outside the Asia-Pacific region are a higher priority for UNAIDS, this is addressed to some extent through extra-budgetary funding to strengthen the responses in Papua New Guinea, the Pacific and Vietnam. UNAIDS' principle of 'know your epidemic, know your response' advocates for HIV prevention responses which are tailored to local contexts and informed by epidemiological evidence. This approach is of particular relevance to the Asia-Pacific region, where the majority of HIV epidemics are concentrated and low-level.

### b) Effectively targets development concerns and promotes issues consistent with Australian priorities

**STRONG** 

UNAIDS contributes to the Australian aid program's strategic goal of saving lives. It is well aligned with Australia's international HIV strategy *Intensifying the response: Halting the spread of HIV*.

The strategic priorities of UNAIDS are well aligned with Australia's HIV strategy at regional level. The Regional Support Team for Asia and the Pacific (RST-AP) has improved its focus on populations at higher risk, as well as enhanced its provision of technical assistance and supported countries to remove punitive laws which were hindering effective HIV responses. In the Asia-Pacific region, this has translated into more than three times as many people receiving antiretroviral treatment than in 2006. Furthermore, in Burma, Cambodia, India, Nepal and Thailand, HIV prevalence is now stable or in decline.

### c) Focuses on crosscutting issues, particularly gender, environment and people with disabilities

**STRONG** 

UNAIDS' integration of gender issues is strong. UNAIDS has also recently started to include a disability perspective in HIV advocacy and programming. UNAIDS does not focus on environmental issues.

Gender and human rights issues are a significant focus of UNAIDS' programs. Gender related activities include enacting and enforcing anti-discrimination legislation, promoting awareness of gender-violence issues, and expanding access to sexual and reproductive health care programs.

These programs are supported by UNAIDS' action plan for gender equality. This plan has improved gender-disaggregated reporting, and increased the role of women in national planning.

However, a report to the twenty-eighth Program Coordinating Board on the gender sensitivity of AIDS responses concluded that significant gaps remain. For example, despite the above successes, funding for gender related programs remains low, and policies could still be better adapted to incorporate gender issues.

#### d) Performs effectively in fragile states

**SATISFACTORY** 

UNAIDS' focus on high impact priority countries makes fragile states a de facto focus of UNAIDS' work. UNAIDS does not have policies specific to the context of fragile states, however, this does not appear to hinder its effectiveness in such environments. For example, in the Asia-Pacific, UNAIDS works with countries that contribute large numbers of peacekeepers and has programs addressing sexual violence in conflict and post-conflict settings.

UNAIDS has contributed to research into best practice HIV programming in fragile areas. It recently collaborated with the AIDS, Security and Conflict Initiative (ASCI) to investigate this topic, which included an analysis of countries and programs in the Pacific.

#### 3. Contribution to the wider multilateral development system

UNAIDS' coordination role extends to: leadership and advocacy; coherence and partnership; and mutual accountability. Its complex structure has previously made this coordination role challenging, and has resulted in an unclear delineation of responsibilities between organisations. UNAIDS' newly implemented Division of Labour and more transparent budgeting framework will likely improve its effectiveness in this area, but it is too early to determine results.

UNAIDS contributes to the development of normative frameworks and guidelines, in collaboration with the World Health Organization, across a range of areas, including antiretroviral treatments, HIV and tuberculosis and infant feeding. However UNAIDS can do more to ensure guidance is relevant to concentrated and low-level epidemics. UNAIDS has also played a catalytic role in increasing financing for HIV from all sources from US\$300 million in 1996 to US\$15 billion in 2010 for low and middle-income countries. UNAIDS is a creative organisation, and develops innovative and valuable policies such as 'Know your epidemic, know your response' and the UNAIDS Investment Framework.

#### a) Plays a critical role at global or national-level in coordinating development or humanitarian efforts

**SATISFACTORY** 

UNAIDS' coordination role extends to leadership and advocacy, coherence and partnership, and mutual accountability. Unclear policies and strategy documents have previously constrained UNAIDS' effectiveness in this role, but recent reforms in this area show promise.

The second independent evaluation found that UNAIDS was having difficulties in exerting its leadership and improving country-level coordination, and that its successes at country-level were closely linked with the commitment of local UN officials.

In 2010, the Division of Labour was revised to improve the delineation of responsibilities between co-sponsors. There are early indications that this new approach is improving coordination: feedback from India, for example, suggests that coordination among co-sponsors has improved since the new Division of Labour was developed.

Directors of UNAIDS Regional Support Teams are members of the Regional UN Development Group Teams, providing oversight, coordination and leadership, as well as technical support to the Resident Coordinators. UNAIDS has also focussed on increasing accountability by repositioning itself at the country-level within the Resident Coordinator system.

At the global level, UNAIDS is a member of the leading health and development bodies, including the H8, the H5 and the International Health Partnership (IHP+).

### b) Plays a leading role in developing norms and standards or in providing large-scale finance or specialist expertise

**STRONG** 

UNAIDS has played a leading role in generating and sharing strategic information on AIDS. It actively collaborates with WHO to develop and promote normative frameworks and guidelines. Examples include guidelines on antiretroviral treatment, HIV/TB, infant feeding, and prevention of vertical transmission.

UNAIDS has also played a role in increasing financing for HIV prevention. It cites an increase in funding by its co-sponsors for the global AIDS response from US\$300 million in 1996 to US\$15 billion in 2010.

### c) Fills a policy or knowledge gap or develops innovative approaches

**STRONG** 

UNAIDS develops innovative policies and approaches to HIV prevention. For example, UNAIDS developed the principle of 'know your epidemic, know your response'. The Report of the Commission on AIDS in Asia found that this policy has improved evidence-based decision making at country-level.

# ORGANISATIONAL BEHAVIOUR 4. Strategic management and performance STRONG

UNAIDS set out new objectives in its 2011–15 strategy, presenting a clear vision for its work and the work of its co-sponsors. The strategy is clearly structured and includes an extensive framework for monitoring progress and guiding future directions.

UNAIDS' governing body is effective in scrutinising policy and governance arrangements, and regularly directs reforms based on evaluation recommendations.

Monitoring and evaluation has been adequate but the Unified Budget and Workplan was a constraint on the effectiveness of evaluation as it did not clearly link inputs and outcomes. The new framework, which requires each co-sponsor to measure and evaluate its own programs according to a series of well-defined indicators, should provide a basis for improving monitoring and evaluation in the future.

UNAIDS has also recently reformed its administrative and human resources systems. While signs are encouraging it is too early to adequately evaluate effectiveness.

a) Has clear mandate, strategy and plans effectively	STRONG
implemented	SIKUNU

UNAIDS' mandate is clear: to provide assistance to build country and community capacity, and to mobilise political and social support to prevent and respond to the threat of HIV.

UNAIDS' strategy is set out in its 2011–15 strategy *Getting to Zero*. This document represents a clear, overarching framework for guiding future directions. It is based around

three general strategic directions for action: revolutionise HIV prevention; catalyse the next phase of treatment, care and support; and advance human rights and gender equality for the HIV response. The Strategy also includes ten concrete goals against which progress can be measured. Due to the strategy's recent implementation, the Australian Multilateral Assessment did not find extensive evidence that this strategy was successfully directing decision making throughout the organisation.

#### b) Governing body is effective in guiding management

**STRONG** 

The Programme Coordinating Board (PCB) is UNAIDS' governing body. It is generally effective in overseeing strategic direction and holding management to account for performance.

The PCB has overseen the development of UNAIDS' 2011–15 strategy *Getting to Zero*. The second independent evaluation was requested by the board, and it is being used to push for organisational and governance reforms to improve performance and strengthen the oversight role of the PCB. It has overseen implementation of a number of improvements following the evaluation in the areas of performance and strategic decision making, including refocussing epidemic priorities and improving organisational efficiency through introducing new administrative systems.

## c) Has a sound framework for monitoring and evaluation, and acts promptly to realign or amend programs not delivering results

**SATISFACTORY** 

Previously, the Unified Budget and Workplan (UBW) constrained the effectiveness of UNAIDS evaluation systems because it did not clearly link inputs and outcomes. For 2010–11, the UBW did not specify measureable targets which were linked to key output indicators.

This appears likely to improve in the near future, however. UNAIDS has shifted to a four year planning cycle, enabling it to plan and measure achievements over longer time frames. The UBRAF and 2010 Division of Labour requires each co-sponsor to measure and evaluate its own programs according to a series of well defined indicators linked to the achievement of its strategy goals, with UNAIDS collecting and synthesising data to track progress. The UBRAF also includes an annual performance review process. It is therefore reasonable to expect that UNAIDS monitoring and evaluation practices will improve in the near-future.

### d) Leadership is effective and human resources are well managed

**SATISFACTORY** 

The second independent evaluation concluded that UNAIDS' administrative systems were complex and reduced the efficiency of financial and resource management. The evaluation found that staff numbers had been increased significantly without careful adherence to good human resources practices.

Human resource management is improving with the merger (following the 2010 PCB) of the dual administrative systems. Management is implementing a new Human Resource Strategy and has integrated a Competency Framework into all human resources systems to better monitor and improve staff performance in the future.

#### 5. Cost and value consciousness

**SATISFACTORY** 

Management regularly scrutinises budget allocations, cost and source priorities. UNAIDS has clear guidelines for resource allocation and expenditure reporting, although further targeting of resources based on evidence will ensure more strategic investments in HIV. In recent years, areas of cost reductions have included travel and administrative systems.

UNAIDS has previously been criticised for the high transaction costs associated with its Unified Budget and Workplan. It has worked to address this through the introduction of a clearer Division of Labour, and has considered the performance of its co-sponsors in the allocation of its 2012–13 resources.

Attempts to improve cost effectiveness of partners include establishing criteria for demonstrating comparative advantage, and collaboratively developing new lower-cost treatments.

### a) Governing body and management regularly scrutinise costs and assess value for money

**STRONG** 

The subcommittee on the preparation of the UBRAF regularly scrutinises budget allocations, costs, and source priorities, and efficiency targets are one of the considerations of the UBRAF. In addition, UNAIDS' governing body requires that decisions on resource allocations be made in accordance with priorities and with a consideration of the comparative advantage of the agency. UNAIDS cites travel as one area where cost efficiencies have been made: in the 2010–11 biennium, management oversaw a 25 per cent reduction of these costs.

### b) Rates of return and cost effectiveness are important factors in decision making

**SATISFACTORY** 

UNAIDS has not previously systematically considered rates of return across all programming decisions. However, in 2012–13, UNAIDS has allocated resources in the UBRAF based on epidemic priorities and the performance of its co-sponsors. UNAIDS will conduct a mid-term review of performance and achievements to determine final allocations for 2013. Although co-sponsors may have their own procurement policies for programs, UNAIDS is responsible for quality control over the procurement of technical assistance.

### c) Challenges and supports partners to think about value for money

**SATISFACTORY** 

UNAIDS has previously experienced difficulty in demonstrating that it can challenge partners to think about value for money. The second independent evaluation concluded that UNAIDS has low efficiency in accountability and managing performance, and the

Australian Multilateral Assessment did not find evidence that UNAIDS had been able to successfully challenge its co-sponsors on value for money in the past.

Efforts are being made to address this, however. The UNAIDS Strategy embeds efficiency and value for money throughout the document. In addition, UNAIDS has signed onto the International Health Partnership Global Compact, pledging its commitment to improving the efficiency and effectiveness of delivering improved country owned health programs. Only time will tell how effective these new measures are in practice.

#### 6. Partnership behaviour

**STRONG** 

UNAIDS works effectively with partners, and is committed to improving these partnerships—for example, through its new Division of Labour. It also actively seeks out new partners.

UNAIDS demonstrates leadership in the area of alignment through its Three Ones strategy (one national HIV strategy, one national authority, one national monitoring and evaluation framework). The second independent evaluation noted that UNAIDS was not sufficiently active in addressing the Paris Declaration on Aid Effectiveness principles. However, since then UNAIDS has taken steps to improve its alignment with the principles. For example, it has become an active member of the International Health Partnership (IHP+), which attempts to align donor countries and organisations with a single country-led national health strategy. Only time will tell if these efforts are successful.

UNAIDS provides strong technical support to Global Fund financed programs. The Global Fund works to clarify technical assistance and capacity building needs at country-level. To ensure more targeted technical support is available, UNAIDS needs greater resourcing in some countries (such as Papua New Guinea) and for these staff to have appropriate levels of technical expertise.

UNAIDS provides a voice for stakeholders at the institutional level, but is less consultative at program level. NGOs and people living with HIV are represented on UNAIDS' governing board, and it brings together a wide range of stakeholders from community, government and donors. However, the second independent evaluation suggested that involvement of people living with HIV in the design and implementation of programs could be improved and made more meaningful.

#### a) Works effectively in partnership with others

**STRONG** 

UNAIDS has appropriate policies in place to assist in maintaining effective partnerships with community organisations, governments and donors, which are generally viewed as effective.

UNAIDS recently introduced its new Division of Labour, which clearly delineates areas of responsibility between its respective co-sponsors. This document lists clear areas of responsibility, for example, 'ensure good quality education for a more effective HIV response', and lists the conveners which will take the lead in that area.

UNAIDS is working to improve relationships with specific partners to increase their impact. It introduced a Memorandum of Understanding with the Global Fund in 2008,

and issued guidance to Joint UN Teams on HIV working with the Global Fund at a country-level in 2010.

Stakeholders generally view UNAIDS' partnership behaviour as appropriate. The five-year evaluation of the Global Fund, for example, found that of the Fund's partners, UNAIDS has the closest and most effective partnership.

### b) Places value on alignment with partner countries' priorities and systems

**SATISFACTORY** 

UNAIDS demonstrates leadership in alignment through its 'Three Ones' strategy (one national HIV strategy, one national authority, and one national monitoring and evaluation framework). Following the second independent evaluation finding that UNAIDS was not sufficiently active in addressing the Paris Declaration on Aid Effectiveness Principles, UNAIDS has reinforced efforts to align and harmonise with partner systems. For example, UNAIDS chairs the UNDG Working Group on Resident Coordinator Issues which undertook work to harmonise business practices and integrate operations and programs in some 'One UN' pilot countries.

In the Pacific, UNAIDS works in close partnership with national and regional partners. For example, UNAIDS supported the Fiji Ministry of Health by coordinating feedback from development partners on the Fiji National Strategic Plan on HIV/STIs.

### c) Provides voice for partners and other stakeholders in decision making

**STRONG** 

UNAIDS incorporates partner views and feedback into its operations, providing stakeholders direct access to key decision making bodies. People living with HIV (PLHIV) and civil society are represented on UNAIDS' governing board, although they do not have voting rights.

UNAIDS provides technical and financial support to representatives of community organisations and national partners to participate in key national, regional and international fora, for example, the 2011 UN High Level Meeting on HIV which set ambitious, time-bound prevention and treatment targets. Potential remains to do more in this area. The second independent evaluation found that there is limited evidence of PLHIV involvement in the design, monitoring and evaluation of programs.

#### 7. Transparency and accountability

**SATISFACTORY** 

UNAIDS makes available a wide range of documents on its website, including board papers, policy documents, performance monitoring reports and budget information. However, it lacks a formal information disclosure policy, and is not a signatory to the International Aid Transparency Initiative.

UNAIDS' resources have been allocated according to the unified budget and work plan, which provides a clear process for allocation of some, though not all, resources. This may be improved to some extent in the future through the UBRAF, which incorporates clear

explanations of the process and criteria to be used for resource allocation, but this new framework is yet to be fully implemented.

UNAIDS has appropriate financial management policies in place and has adopted the International Public Sector Accounting Standards for financial management. Financial audits are regularly undertaken.

Through its Division of Labour and the new strategic framework, UNAIDS has embedded a robust accountability framework for the work of its partners. There is less evidence that UNAIDS promotes transparency among these partners and is able to hold them accountable for results.

### a) Routinely publishes comprehensive operational information, subject to justifiable confidentiality

SATISFACTORY

UNAIDS is not a signatory to IATI. It does, however, make available a wide range of information on its website, including strategy and policy documents, technical papers, PCB papers and minutes, budget papers, performance monitoring reports and audited financial statements. These documents are generally available in multiple languages and presented in an accessible way. Some relevant information was not located on the UNAIDS website, however, such as project documentation of the joint program.

Although UNAIDS has developed guidelines to protect privacy and confidentiality in the documents it releases, UNAIDS does not have a formal information disclosure policy to ensure that all relevant information is made publicly available.

### b) Is transparent in resource allocation, budget management and operational planning

**SATISFACTORY** 

To date, UNAIDS resources have been allocated according to the Unified Budget and Workplan. This document provides a clear explanation of how some, though not all, resources are to be allocated. The 2010 performance monitoring report reported that 61 per cent of UNAIDS resources were allocated to UNAIDS' 10 priority areas and 39 per cent to its six crosscutting strategies.

This may improve with the implementation of UNAIDS' new strategic framework, the UBRAF. This framework incorporates clear explanations of the process and criteria to be used for resource allocation.

### c) Adheres to high standards of financial management, audit, risk management and fraud prevention

**SATISFACTORY** 

UNAIDS adheres to the International Public Sector Accounting Standards (IPSAS) for financial management, and financial audits are undertaken regularly. UNAIDS also adheres to the UN System Accounting Standards.

UNAIDS has supported efforts by its co-sponsors to adopt zero tolerance approaches to corruption and has adopted the WHO fraud prevention policy.

### d) Promotes transparency and accountability in partners and recipients

**SATISFACTORY** 

UNAIDS does promote accountability among its co-sponsors through the Division of Labour, which sets out roles and responsibilities for reporting, and defines standards against which co-sponsors' progress can be measured.

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